

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



January 4, 1989

ALL-COUNTY INFORMATION NOTICE NO. I-01-89

TO: ALL COUNTY WELFARE DIRECTORS

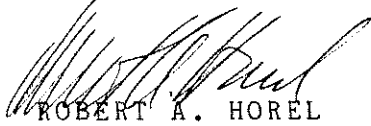
SUBJECT: COUNTY CONTACTS FOR OVERPAYMENT/OVERISSUANCE
INFORMATION

This letter is to request input on County contacts for various phases of the overpayment recovery process for inclusion in a statewide list. The Overpayment Recovery Bureau (ORB) recently completed the last of six (6) Regional Introductory Sessions. Participants stressed the necessity of having contact person(s) in each County for questions related to overpayment/overissuance information. These contacts will help the Counties obtain particular information in a more efficient and timely manner.

We are requesting that your County supply ORB with a list of contact persons in the County to facilitate the exchange of information between Counties. Please complete the attached form with the names of the contact person(s) and the type of questions you believe should be asked of this person(s) (i.e., ICT's, SSA 4972/FNS 209, etc.). Please submit as many names as your County wishes by February 10, 1989.

We thank the participants in the Regionals for their enthusiasm, cooperation, and input at the sessions. Your cooperation in submitting contacts is appreciated; the contact information will be of tremendous benefit to all the Counties in their collection of overpayments/overissuances.

If you have any questions, please contact Eva L. Lopez, Overpayment Recovery Bureau at (916) 323-7233.


ROBERT A. HOREL
Deputy Director

Attachment

cc: CWDA

COUNTY CONTACTS FOR OVERPAYMENT/OVERISSUANCE INFORMATION

PLEASE COMPLETE AND SUBMIT BY FEBRUARY 10, 1989 TO:

State Department of Social Services
Overpayment Recovery Bureau
744 P Street M.S. 16-30
Sacramento, CA 95814

COUNTY: _____	COUNTY: _____
NAME: _____	NAME: _____
PHONE #: _____	PHONE #: _____
OFFICE HOURS: _____	OFFICE HOURS: _____
TYPE OF QUESTIONS: _____	TYPE OF QUESTIONS: _____
_____	_____